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|---|-------------|-------------------------|---------------------|------------------|
| APPLICATION NO. | FLYING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 10/876,628 | 04/04/2007 | Christian Peter Petzelt | 02839/46201 | 8178 |
| 36646 | 7595 | 10/14/2009 | EXAMINER | |
| KENYON & KENYON LLP ONE BROADWAY NEW YORK, NY 10004 | | | ARNOLD, ERNST V | |
| ART UNIT | | PAPER NUMBER | | |
| 1616 | | | | |
| MAIL DATE | | DELIVERY MODE | | |
| 10/14/2009 | | PAPER | | |

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

| | | | |
|--|-----------------------------|-------------------------------------|--|
| Examiner-Initiated Interview Summary | Application No. | Applicant(s) | |
| | 10/576,628 | PETZELT ET AL. | |
| | Examiner ERNST V. ARNOLD | Art Unit 1616 | |
| All Participants: | | Status of Application: _____ | |
| (1) <u>ERNST V. ARNOLD</u> . | | (3) _____. | |
| (2) <u>Joseph Coppola</u> . | | (4) _____. | |
| Date of Interview: <u>7 October 2009</u> | | Time: _____ | |
| Type of Interview: <input checked="" type="checkbox"/> Telephonic <input type="checkbox"/> Video Conference <input type="checkbox"/> Personal (Copy given to: <input type="checkbox"/> Applicant <input type="checkbox"/> Applicant's representative) | | | |
| Exhibit Shown or Demonstrated: <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, provide a brief description: _____. | | | |
| Part I. | | | |
| Rejection(s) discussed: | | | |
| Claims discussed: | | | |
| Prior art documents discussed: <i>See Continuation Sheet</i> | | | |
| Part II. | | | |
| SUBSTANCE OF INTERVIEW DESCRIBING THE GENERAL NATURE OF WHAT WAS DISCUSSED: <i>See below.</i> | | | |
| Part III. | | | |
| <input type="checkbox"/> It is not necessary for applicant to provide a separate record of the substance of the interview, since the interview directly resulted in the allowance of the application. The examiner will provide a written summary of the substance of the interview in the Notice of Allowability. <input type="checkbox"/> It is not necessary for applicant to provide a separate record of the substance of the interview, since the interview did not result in resolution of all issues. A brief summary by the examiner appears in Part II above. | | | |
| <i>/Ernst V Arnold/ Primary Examiner, Art Unit 1616</i> | | | |
| <i>(Applicant/Applicant's Representative Signature - if appropriate)</i> | | | |

Continuation of Identification of prior art discussed: The Examiner contacted Mr. Coppola to follow up on the interview of Friday October 02. It was determined by the Office (STIC search) that the reference of Bedi et al. Crit Care Med 2003 was entered into Pubmed on 10/8/03 (see page 2 of 2 of the attachment underlined in red) and is therefore prior art.

PTO-892 is attached.

| | | | | |
|-----------------------------------|--|-------------------------|---|-------------|
| Notice of References Cited | | Application/Control No. | Applicant(s)/Patent Under Reexamination | |
| | | 10/576,628 | PETZELT ET AL. | |
| Examiner | | Art Unit | | Page 1 of 1 |
| ERNST V. ARNOLD | | 1616 | | |

U.S. PATENT DOCUMENTS

| * | | Document Number Country Code-Number-Kind Code | Date MM-YYYY | Name | Classification |
|---|---|--|-----------------|------|----------------|
| | A | US- | | | |
| | B | US- | | | |
| | C | US- | | | |
| | D | US- | | | |
| | E | US- | | | |
| | F | US- | | | |
| | G | US- | | | |
| | H | US- | | | |
| | I | US- | | | |
| | J | US- | | | |
| | K | US- | | | |
| | L | US- | | | |
| | M | US- | | | |

FOREIGN PATENT DOCUMENTS

| * | | Document Number Country Code-Number-Kind Code | Date MM-YYYY | Country | Name | Classification |
|---|---|--|-----------------|---------|------|----------------|
| | N | | | | | |
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| | R | | | | | |
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| | T | | | | | |

NON-PATENT DOCUMENTS

| | | |
|---|---|---|
| * | | Include as applicable: Author, Title Date, Publisher, Edition or Volume, Pertinent Pages) |
| | U | Bedi et al. Crit Care Med 2003 publication information in Pubmed; 2 pages. |
| | V | |
| | W | |
| | X | |

*A copy of this reference is not being furnished with this Office action. (See MPEP § 707.05(a).)
Dates in MM-YYYY format are publication dates. Classifications may be US or foreign.

1: Bedi A et al.

<http://www.ncbi.nlm.nih.gov/pubmed/14530753?ordinalpos=1&itool=EntrezSystem2.PEntrez.Pubmed.Pubmed_ResultsPanel.Pubmed_RVMedline> Use of xenon as a sedative fo...[PMID: 14530753]

Related Articles

<http://www.ncbi.nlm.nih.gov/sites/entrez?Db=pubmed&DbFrom=pubmed&Cond=Link&LinkName=pubmed_pubmed&LinkReadableName=Related%20Articles&IdsFromResult=14530753&ordinalpos=1&itool=EntrezSystem2.PEntrez.Pubmed.Pubmed_ResultsPanel.Pubmed_RVMedline>, Links <javascript:PopUpMenu2_Set(Menu14530753);>

PMID - 14530753

OWN - NLM

STAT - MEDLINE

DA - 20031007

DCOM - 20031105

LR - 20071115

IS - 0090-3493 (Print)

VI - 31

IP - 10

DP - 2003 Oct

TI - Use of xenon as a sedative for patients receiving critical care.

PG - 2470-7

AB - OBJECTIVE: Many sedative regimens are used in the intensive care setting, but none are wholly without adverse effect. Xenon is a noble gas with sedative and analgesic properties. It has been used successfully as a general anesthetic and has many desirable properties, not least of which is a minimal effect on the myocardium. In theory, xenon may provide sedation without adverse effect for certain groups of critically ill patients. The objective of this study was to assess the feasibility of using xenon as an intensive care sedative. DESIGN: Double-blind, randomized study. SETTING: Tertiary-level intensive care unit. SUBJECTS: Twenty-one patients admitted to an intensive care unit following elective thoracic surgery. INTERVENTIONS: A standard intensive care sedation regimen (intravenous propofol at 0.5 mg.kg⁻¹.hr⁻¹ and alfentanil 30 microg.kg⁻¹.hr⁻¹) was compared with a xenon sedation regimen delivered using a novel bellows-in-bottle delivery system. MEASUREMENTS AND MAIN RESULTS: Each sedative regimen was continued for 8 hrs. The hemodynamic effects, additional analgesic requirements, recovery from sedation, and effect on hematological and biochemical variables were compared for the two sedation regimens. All patients were successfully sedated during the xenon regimen. The mean +/- SD end-tidal xenon concentration required to provide sedation throughout the duration of the study was 28 +/- 9.0% (range, 9-62%). Arterial systolic, diastolic, and mean pressures showed a greater tendency for negative gradients in patients receiving the propofol regimen ($p < .05$, $p < .1$, and $p < .01$, respectively). Recovery following xenon was significantly faster than from the standard sedation regimen ($p < .0001$). Hematological and biochemical laboratory markers were within normal clinical limits in both groups. CONCLUSIONS: Xenon provided satisfactory sedation in our group of patients. It was well tolerated with minimal hemodynamic effect. Recovery from this agent is extremely rapid. We have demonstrated the feasibility of using xenon within the critical care setting, without adverse effect.

AD - Royal Group of Hospitals, Belfast, Northern Ireland.
FAU - Bedi, Amit
AU - Bedi A

FAU - Murray, James M

AU - Murray JM

FAU - Dingley, John

AU - Dingley J

FAU - Stevenson, Michael A

AU - Stevenson MA

FAU - Fee, J P Howard

AU - Fee JP

LA - eng

PT - Clinical Trial

PT - Journal Article
PT - Randomized Controlled Trial
PT - Research Support, Non-U.S. Gov't
PL - United States
TA - Crit Care Med
JT - Critical care medicine
JID - 0355501
RN - 0 (Anesthetics, Inhalation)
RN - 0 (Anesthetics, Intravenous)
RN - 2078-54-8 (Propofol)
RN - 71195-58-9 (Alfentanil)
RN - 7440-63-3 (Xenon)
SB - AIM
SB - IM
CIN - Crit Care Med. 2003 Oct;31(10):2556-7. PMID: 14530769
MH - Adult
MH - Aged
MH - Aged, 80 and over
MH - *Alfentanil
MH - Anesthetics, Inhalation/*pharmacology
MH - *Anesthetics, Intravenous
MH - *Conscious Sedation
MH - *Critical Care
MH - Double-Blind Method
MH - Feasibility Studies
MH - Female
MH - Hemodynamics/*drug effects
MH - Humans
MH - Intensive Care Units
MH - Male
MH - Middle Aged
MH - Postoperative Care
MH - *Propofol
MH - Xenon/*pharmacology
EDAT - 2003/10/08 05:00
MHDA - 2003/11/06 05:00
CRDT - 2003/10/08 05:00
AID - 10.1097/01.CCM.0000089934.66049.76 [doi]
PST - ppublish
SO - Crit Care Med. 2003 Oct;31(10):2470-7.